



Date:

Submittal Sheet for Historic Preservation Review Filing Fees

State Historic Preservation Division
601 Kamokila Blvd., #555, Kapolei, Hawai'i 96707

Agency/Firm (Requesting Review):

Contact:

Phone: Fax: E-Mail:

Address:

Title of Report/Plan:

.....

.....

Island: District: Ahupua'a:

TMK [(1) 1-1-001:001]:

Submitted Plan/Report Fee & Type: (All reports or plans submitted to the SHPD for review shall be accompanied by the appropriate fee in accordance with HAR §13-275-4 and §284-4).

.....	Indicate here (X) if report is a re-submittal (no fee charged)
..... \$50	Archaeological Assessment
..... \$150	Archaeological Inventory Survey Plan
..... \$450	Archaeological, Architectural or Ethnographic Survey Report
..... \$150	Preservation Plan
..... \$25	Monitoring Plan
..... \$150	Archaeological Data Recovery Plan
..... \$250	Burial Treatment Plan
..... \$100	Archaeological Monitoring Report, if resources reported
..... \$450	Archaeological Data Recovery Report
..... \$450	Ethnographic Documentation Report
..... \$25	Burial Disinterment Report
..... \$50	Osteological Analysis Report

Make check payable to "Hawai'i Historic Preservation Special Fund." A service charge of \$15 will be assessed on all dishonored checks pursuant to HRS §40-35.5" A copy of this form will be mailed or faxed back to you and will serve as your receipt.

Fee Total: \$

For Office Use Only:

Date Received:	Receipt No.:
	Payment Method: Cash \$ Check: Check No.:
Log. No.:	Receipt Issued by: Treasury Deposit Receipt No: